Form	(RF-3)
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1041310	ge in Company's premion effective	um or rate level p 12/01/08	produced by rate	
	(1)		(2) Statewide Annual	(3) Percent Change
Covera	age		Premium Volume *	(+ or -)**
Automobile Liabi	ility			
Private Passe	•		•	
Commercial	ilgei		\$161,057	-8.1%
2. Automobile Phys	sical Damage			
Private Passe				
Commercial			\$17,125	-2.0%
3. Liability Other Th	nan Auto			
4. Burglary and The				
5. Glass				
6. Fidelity				
7. Surety				
8. Boiler and Machi	inery			
9. Fire	•			
10. Extended Cover	rage			
11. Inland Marine				
12. Homeowners				
13. Commercial Mu	Iti-Peril	•	· · · · · · · · · · · · · · · · · · ·	
14. Crop Hail	•			
15. Other				
Line of In	isurance			
Does filing only apply	to certain territory(s) or	certain class(s)	If so, specify:	
	/1 C C 11			
			organization, specify organization, specify organization	
Adoption of ISO's 2008	Revised Comm'l. Auto Lo	ss Costs, using o	ur current loss cost multiplier	s for:
	Revised Comm'l. Auto Lo		ur current loss cost multiplier physical damage = 1.51	s for: 4
Adoption of ISO's 2008 Liability	Revised Comm'l. Auto Lo = 1.503	ss Costs, using or and	ur current loss cost multiplier	s for: 4
Adoption of ISO's 2008	Revised Comm'l. Auto Lo = 1.503	ss Costs, using or and	ur current loss cost multiplier physical damage = 1.51	s for: 4

AMERICAN HOME ASSURANCE COMPANY

Name of Company

Joan D. Baskerville, Filings Analyst

Official - Title

^{*} Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Form (RF-3)	SUMMARY SHEET	
Change in Company's prevision effective	oremium or rate level produced by rate 12/01/08	·.
(1)	(2) Statewide Annual	(3) Percent Change
Coverage	Premium Volume *	(+ or -)**
Automobile Liability Private Passenger		
Commercial	\$544,672	-8.1%
Automobile Physical Damage		
Private Passenger		
Commercial	\$102,584	-2.0%
Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other	·	

Does filing only apply to certain territory(s) or certain class(s)? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Liability =	1.503	 physical damage =		
		Garage Dealers =	1.691	
ISO Reference Filing #(s):	CA-2008- BRLA1	1		

^{*} Adjusted to reflect all prior rate changes.

Line of Insurance

COMMERCE and INDUSTRY INSURANCE COMPANY Name of Company

Joan D. Baskerville, Filings Analyst

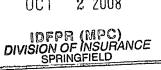
Official - Title

^{**} Change in Company's premium level which will result from application of new rates.

2 2008 OCT

Form (RF-3)

SUMMARY SHEET



Change in Company's premium or rate level produced by rate revision effective $\frac{2}{1}$ 09

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
Priva	ile Liability te Passenger		10.10/
2. Automob	ercial File Physical Damage Ste Passenger	\$115,197	-10.1%
Comme	ercial	\$87,905	-2.5%
	ty Other Than Auto ry and Theft		·
5. Glass			
6. Fidelit 7. Surety			
_	and Machinery		
9. Fire	- -		
10. Extende 11. Inland	-		
12. Homeown	-		
	cial Multi-Peril		
14. Crop Ha	iil -		
15. Other			
•	Line of Insurance		
Does filing If so, spec	g only apply to certain t	territory (territories)	or certain classes?
	ription of filing. (If son, specify organization): For all policies ef February 1, 2009, w	an advisory fective on and after e would like to adopt SO Reference File Number
		Our current loss co for auto liability physical damage wil	
		Our File #BA IL0100	002R01

- $\mbox{\scriptsize \star}$ Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

CUMIS	Insurance Society,	Inc.
	Name of Company	

Kim E	. Erfurth,	Rate	&]	Forms	Compliance	Manager
	(Offici	al	- Ti	tle	

Forr	n (RF-3)		SUMM	MARY SHEET	-	
	Change in Con revision effective	npany's premium	or rate level pr 12/01/08	roduced by rate	_	
	(1)			(2) Statewide Annual		(3) Percent Change
	Coverage	<u></u>		Premium Volume	* 	(+ or -)**
	Automobile Liability Private Passenger Commercial Automobile Physical Dama	age .		\$962,815	 	-8.1%
4.	Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass			\$175,794	 	-2.0%
6.	Fidelity Surety				 	
9.	Boiler and Machinery Fire				 	
	Extended Coverage	•				
	Inland Marine			•		
	Homeowners	المواد الأعضار الإرفالية				
	Commercial Multi-Peril					
	Crop Hail			<u> </u>		
15.	Other Line of Insurance					
Doe	s filing only apply to certain		rtain class(s)?	If so, specify:		
	f description of filing. (If filingtion of ISO's 2008 Revised C	Comm'l. Auto Loss	Costs, using our	current loss cost mu	Itipliers for	
	Liability =	1.503	and	physical damage =		
			<u> </u>	Garage Dealers =	1.691	
19	SO Reference Filing #(s):	CA-2008- BRI	Δ1			

GRANITE STATE INSURANCE COMPANY

Name of Company.

Joan D. Baskerville, Filings Analyst

....Official - Title

^{*} Adjusted to reflect all prior rate changes.

^{**} Change in Company's premium level which will result from application of new rates.

13.

Liability = 1.503 and physical damage = 1.514

Garage Dealers = 1.438

ISO Reference Filing #(s):

CA-2008- BRLA1

ILLINOIS NATIONAL INSURANCE CO.

Name of Company ...

Joan D. Baskerville, Filings Analyst

Official - Title

^{*} Adjusted to reflect all prior rate changes.

^{**} Change in Company's premium level which will result from application of new rates.

,	Change in Company's premium or ra	e level produced by rate	e revision enceuve
	(1)	(2)	(3)
	(1)	Annual Pren	
	<u>Coverage</u>	Volume (Illin	
1.	Automobile Liability		
	Private Passenger		
	Commercial	5,458,000	3.7%
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial	1,359,000	
•	Liability Other Than Auto		
١.	Burglary and Theft		
; .	Glass		
ó.	Fidelity		
7.	Surety	·	
3.	Boiler and Machinery		
).	Fire		
).	Extended Coverage		
l.	Inland Marine		
2.	Homeowners		
3.	Commercial Multi-Peril		
	Crop Hail		
i.	Other		•
es i	Line of Insurance Tiling only apply to certain territory (to Public Auto, Uninsured Motorists, Control of the Public Auto, Uninsured Motorists, Control of the Public Auto, Uninsured Motorists, Control of the Public Auto	erritories) or certain clas	sses? If so, specify:
TT	iling only apply to certain territory (t Public Auto, Uninsured Motorists, C	erritories) or certain class Garage, Hired & Non-Ov	sses? If so, specify: wned Auto, Ambulance, All Other Liability
ief I-C.	description of filing. (If filing follow A-R-1 (10-08) replaces the (11-07) et A-R-3 (10-08) replaces the (11-08) et A-R-3 (10-08) et A-R-3	erritories) or certain classification. This page amend lition. This page amend lition. This page amend lition. This page amend	sses? If so, specify: wned Auto, Ambulance, All Other Liability rganization, specify organization): ds Liability and Physical Damage LCMs.
ef -C.	iling only apply to certain territory (to Public Auto, Uninsured Motorists, Condensation of filing. (If filing follow A-R-1 (10-08) replaces the (11-07) example of the condensation of th	erritories) or certain classification. This page amend lition. This page amend lition. This page amend lition. This page amend	sses? If so, specify: wned Auto, Ambulance, All Other Liability rganization, specify organization): ds Liability and Physical Damage LCMs. ds Trailer Interchange Rates.
ef -C.	description of filing. (If filing follow A-R-1 (10-08) replaces the (11-07) et A-R-8 (10-08) replaces the (11-08) replaces the (11-08) replaces th	erritories) or certain classification. This page amend lition. This page amend lition. This page amend lition. This page amend	sses? If so, specify: wned Auto, Ambulance, All Other Liability rganization, specify organization): ds Liability and Physical Damage LCMs. ds Trailer Interchange Rates.
ef -C.	description of filing. (If filing follow A-R-1 (10-08) replaces the (11-07) et A-R-8 (10-08) replaces the (11-07) et A-R-8 (10-08) replaces the (11-07) et A-R-8 (10-08) replaces the (11-07) et al. (10-08) repla	erritories) or certain classification. This page amend lition. This page amend lition. This page amend lition. This page amend	sses? If so, specify: wned Auto, Ambulance, All Other Liability rganization, specify organization): ds Liability and Physical Damage LCMs. ds Trailer Interchange Rates.
ief [-C. [-C. [-C. hys	iling only apply to certain territory (to Public Auto, Uninsured Motorists, Condescription of filing. (If filing follow A-R-1 (10-08) replaces the (11-07) et A-R-5 (10-08) replaces the (11-07) et al. (10-08) re	erritories) or certain classification. This page amend lition.	sses? If so, specify: wned Auto, Ambulance, All Other Liability rganization, specify organization): ds Liability and Physical Damage LCMs. ds Trailer Interchange Rates.
ief I-C.	iling only apply to certain territory (to Public Auto, Uninsured Motorists, Condescription of filing. (If filing follow A-R-1 (10-08) replaces the (11-07) et A-R-5 (10-08) replaces the (11-07) et al. (10-08) re	erritories) or certain classification. This page amend lition.	sses? If so, specify: wned Auto, Ambulance, All Other Liability rganization, specify organization): ds Liability and Physical Damage LCMs. ds Trailer Interchange Rates.
ief -CCC. hys	iling only apply to certain territory (to Public Auto, Uninsured Motorists, Condescription of filing. (If filing follow A-R-1 (10-08) replaces the (11-07) et A-R-5 (10-08) replaces the (11-07) et A-R-8 (10-08) replaces the (11-07) et ical Damage and Cargo Deductible F	erritories) or certain class Garage, Hired & Non-Overs rates of an advisory or dition. This page amend dition. This page amend dition. This page amend dule.	sses? If so, specify: wned Auto, Ambulance, All Other Liability rganization, specify organization): ds Liability and Physical Damage LCMs. ds Trailer Interchange Rates.
ef -CCC.	iling only apply to certain territory (to Public Auto, Uninsured Motorists, Condescription of filing. (If filing follow A-R-1 (10-08) replaces the (11-07) et A-R-5 (10-08) replaces the (11-07) et al. (10-08) re	erritories) or certain classification. This page amend lition.	sses? If so, specify: wned Auto, Ambulance, All Other Liability rganization, specify organization): ds Liability and Physical Damage LCMs. ds Trailer Interchange Rates.
ief -CCC. hys	iling only apply to certain territory (to Public Auto, Uninsured Motorists, Condescription of filing. (If filing follow A-R-1 (10-08) replaces the (11-07) et A-R-5 (10-08) replaces the (11-07) et A-R-8 (10-08) replaces the (11-07) et al. Damage and Cargo Deductible Followship in Company's premium level would from application of new rates.	erritories) or certain class Garage, Hired & Non-Overs rates of an advisory or dition. This page amend dition. This page amend dition. This page amend dule.	sses? If so, specify: wned Auto, Ambulance, All Other Liability rganization, specify organization): ds Liability and Physical Damage LCMs. ds Trailer Interchange Rates.
ef -CCC.	description of filing. (If filing follow A-R-1 (10-08) replaces the (11-07) ed A-R-5 (10-08) replaces the (11-07) ed A-R-8 (10-08) replaces the (11-07) ed A-R-8 (10-08) replaces the (11-07) ed and Damage and Cargo Deductible Filiption of the replaces of the company's premium level we sult from application of new rates.	erritories) or certain class Garage, Hired & Non-Overs rates of an advisory or dition. This page amend dition. This page amend dition. This page amend dule.	sses? If so, specify: wned Auto, Ambulance, All Other Liability rganization, specify organization): ds Liability and Physical Damage LCMs. ds Trailer Interchange Rates. ds Stated Amount Rates. Also adds Single Auto
ef -CCC.	description of filing. (If filing follow A-R-1 (10-08) replaces the (11-07) et A-R-5 (10-08) replaces the (11-07) et A-R-8 (10-08) replaces the (11-07) et al. (10-08) replace	erritories) or certain class Garage, Hired & Non-Overs rates of an advisory or dition. This page amend dition. This page amend dition. This page amend dule.	sses? If so, specify: wned Auto, Ambulance, All Other Liability rganization, specify organization): ds Liability and Physical Damage LCMs. ds Trailer Interchange Rates. ds Stated Amount Rates. Also adds Single Auto National Casualty Company
ief -CCC. hys	description of filing. (If filing follow A-R-1 (10-08) replaces the (11-07) et A-R-5 (10-08) replaces the (11-07) et A-R-8 (10-08) replaces the (11-07) et al. (10-08) replace	erritories) or certain class Garage, Hired & Non-Overs rates of an advisory or dition. This page amend dition. This page amend dition. This page amend dule.	sses? If so, specify: wned Auto, Ambulance, All Other Liability rganization, specify organization): ds Liability and Physical Damage LCMs. ds Trailer Interchange Rates. ds Stated Amount Rates. Also adds Single Auto
ief ief i-C.	description of filing. (If filing follow A-R-1 (10-08) replaces the (11-07) et A-R-5 (10-08) replaces the (11-07) et A-R-8 (10-08) replaces the (11-07) et al. (10-08) replace	erritories) or certain class Garage, Hired & Non-Overs rates of an advisory or dition. This page amend dition. This page amend dition. This page amend dule.	sses? If so, specify: wned Auto, Ambulance, All Other Liability rganization, specify organization): ds Liability and Physical Damage LCMs. ds Trailer Interchange Rates. ds Stated Amount Rates. Also adds Single Auto National Casualty Company
ief N-C.	description of filing. (If filing follow A-R-1 (10-08) replaces the (11-07) et A-R-5 (10-08) replaces the (11-07) et A-R-8 (10-08) replaces the (11-07) et al. (10-08) replace	erritories) or certain class Garage, Hired & Non-Overs rates of an advisory or dition. This page amend dition. This page amend dition. This page amend dule.	sses? If so, specify: wned Auto, Ambulance, All Other Liability rganization, specify organization): ds Liability and Physical Damage LCMs. ds Trailer Interchange Rates. ds Stated Amount Rates. Also adds Single Auto National Casualty Company
ief ief i-C.	iling only apply to certain territory (to Public Auto, Uninsured Motorists, Condescription of filing. (If filing follow A-R-1 (10-08) replaces the (11-07) et A-R-5 (10-08) replaces the (11-07) et A-R-8 (10-08) replaces the (11-07) et al. Damage and Cargo Deductible Followship in Company's premium level we sulf from application of new rates.	erritories) or certain class Garage, Hired & Non-Overs rates of an advisory or dition. This page amend dition. This page amend dition. This page amend dule.	sses? If so, specify: wned Auto, Ambulance, All Other Liability rganization, specify organization): ds Liability and Physical Damage LCMs. ds Trailer Interchange Rates. ds Stated Amount Rates. Also adds Single Auto National Casualty Company Name of Company
ief l-C.	description of filing. (If filing follow A-R-1 (10-08) replaces the (11-07) et A-R-5 (10-08) replaces the (11-07) et A-R-8 (10-08) replaces the (11-07) et al. (10-08) replace	erritories) or certain class Garage, Hired & Non-Overs rates of an advisory or dition. This page amend dition. This page amend dition. This page amend dule.	sses? If so, specify: wned Auto, Ambulance, All Other Liability rganization, specify organization): Is Liability and Physical Damage LCMs. Is Trailer Interchange Rates. Is Stated Amount Rates. Also adds Single Auto National Casualty Company Name of Company Dawn Gormley - Filings Analyst I
ief ief iief iief iief iief iief iief i	description of filing. (If filing follow A-R-1 (10-08) replaces the (11-07) et A-R-5 (10-08) replaces the (11-07) et A-R-8 (10-08) replaces the (11-07) et al. (10-08) replace	erritories) or certain class Garage, Hired & Non-Overs rates of an advisory or dition. This page amend dition. This page amend dition. This page amend dule.	sses? If so, specify: wned Auto, Ambulance, All Other Liability rganization, specify organization): ds Liability and Physical Damage LCMs. ds Trailer Interchange Rates. ds Stated Amount Rates. Also adds Single Auto National Casualty Company Name of Company

Forr	n (RF-3)		SUMN	MARY SHEET	_	
	Change in Con	npany's premium or	rate level n	roduced by rate		
	revision effective		12/01/08			•
					_	
	(1)			(2) Statewide Annual Premium Volume		(3) Percent Change (+ or -)**
	Coverage	_		Premium volume		(101-)
1.	Automobile Liability Private Passenger					
	Commercial			\$369,348		-8.1%
2.	Automobile Physical Dama	age				
	Private Passenger					0.00/
_	Commercial			\$46,740		-2.0%
	Liability Other Than Auto				- ' -	
	Burglary and Theft					
	Glass					
	Fidelity					
_	Surety					
8.	Boiler and Machinery Fire					
9.	Extended Coverage	1				
11.	Inland Marine		** *			
12.	Homeowners			· <u>······</u>		
	Commercial Multi-Peril					
14.						
15.				·		
15.	Line of Insurance		<u> </u>			
	Line of madranee			•		
Doe	s filing only apply to certain	territory(s) or certa	in class(s)?	If so, specify:		
	•g,,,	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, , , , , , , , , , , , , , , , , , , ,		
	f description of filing. (If filingtion of ISO's 2008 Revised C	omm'l. Auto Loss Co	sts, using our	current loss cost mu	Itipliers for	
	Liability =	1.277	and	physical damage =		
				Garage Dealers =	1.438	
	SO Reference Filing #(s):	CA-2008- BRLA1		****		
				<u></u>		<u> </u>
4	Authoritani kaomantin'i Ethiopia	-46				
** (Adjusted to reflect all prior r Change in Company's prem	ate cnanges. ium level which will	result from a	application of new r	ates.	

NEW HAMPSHIRE INSURANCE COMPANY Name of Company

Joan D. Baskerville, Filings Analyst
Official - Title

Form (RF-3) ILLINOIS DEPARTMENT OF INSURANCE **SUMMARY SHEET**

Change in Company's premium or rate le	ion effective	2/1/2009 and 2/15/2009		
(1) <u>Coverage</u>	(2) Annual Premiu Volume (Illinois		(3) Perco <u>Change (</u> -	ent
			 -	
Automobile Liability Private Passenger Commercial	335,110		3.8	%
Automobile Physical Damage	300,110_			
Private Passenger Commercial	173,476		3.8	%
3. Liability Other Than Auto				
4. Burglary and Theft5. Glass				
6. Fidelity				
7. Surety				
8. Boiler and Machinery				
9. Fire10. Extended Coverage				
11. Inland Marine				
12. Homeowners		·		
13. Commercial Multi-Peril				
14. Crop Hail 15. Other				
Line of Insurance		- 10 - 1		
Does filing only apply to certain territory		0 lf:6	Dunimana Austa	
*Adjusted to reflect all prior rate changes **Change in Company's premium level w	hich will result from applic			
	• ••	Northion	ed Cooyelty Compan	
	<u>-:</u>		nd Casualty Compan lame of Company	У
	*** **			
		Amy Ozmi	<u>un - State Filing Ana</u> Official – Title	lyst
	on a paper to see . In		Official - Title	
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Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate !	2/1/09 new and 2/15/09 renewal	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private Passenger Commercial	1,031,962	-3.0%
2. Automobile Physical Damage	611,279	-3.0%
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		****
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. OtherLine of Insurance		
Line of Insurance		
Does filing only apply to certain territory	(territories) or certain classes? If so, specif	y: Public Auto
Brief description of filing. (If filing follow UM/UIM rating methodology and are filing	rs rates of an advisory organization, specifing rates for specific limits so the rates do no	y organization): We have simplified the ot vary by vehicle type.
*Adjusted to reflect all prior rate change **Change in Company's premium level v	s. which will result from application of new rate	es.
	A I a saladi.	and Incurance Company
	<u> </u>	and Insurance Company Name of Company
	Amy Oz	mun - State Filing Analyst
	74119 02	Official – Title
•		

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective <u>-0.7% rate change for effective dates of 10/15/2008 new business</u>, and 12/15/2008 for commercial renewal business.

1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hall 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Changes to commercial vehicle symbol factors. Several changes to the underwriting quide. The overall proposed change is -0.7%. *Adjusted to reflect all prior rate changes. *Adjusted to reflect all prior rate changes. *Adjusted in Company's premium level which will result from application of new rates. Safeway Insurance Company Name of Company Name of Company Denise Farnan - Consulting Actuary Perr & Knight Official - Title	(1) <u>Coverage</u>		(2) ual Premium <u>me (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>	
Passenger Commercial \$1.0M -2.6% 2. Automobile Physical Damage Private Passenger Commercial \$.3M +1.3% 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boller and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Changes to commercial vehicle symbol factors. Several changes to the underwriting guide. The overall proposed change is -0.7%. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Safeway Insurance Company Name of Company Denise Farnan -Consulting Actuary Perr & Knight Official - Title				·	
Private Passenger Commercial \$.3M	Passenger Commercial		\$1.0M	-2.6%	
3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boller and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peni 14. Crop Hali 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing, (If filing follows rates of an advisory organization, specify organization): Changes to commercial vehicle symbol factors. Several changes to the underwriting guide. The overall proposed change is -0.7%. *Adjusted to reflect all prior rate changes. *Change in Company's premium level which will result from application of new rates. Safeway Insurance Company Name of Company Denise Farnan -Consulting Actuary Perr & Knight Official - Title			\$.3M	+1.3%	
5. Glass 6. Fidelity 7. Surety 8. Boller and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hall 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Changes to commercial vehicle symbol factors. Several changes to the underwriting quide. The overall proposed change is -0.7%. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Safeway Insurance Company Name of Company Denise Farnan -Consulting Actuary Perr & Knight Official - Title	3. Liability Other Than Auto				
6. Fidelity 7. Surety 8. Boller and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filling only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filling. (If filling follows rates of an advisory organization, specify organization): Changes to commercial vehicle symbol factors. Several changes to the underwriting guide. The overall proposed change is -0.7%. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Safeway Insurance Company Name of Company Denise Farman -Consulting Actuary Perr & Knight Official – Title					
7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing, (If filing follows rates of an advisory organization, specify organization): Changes to commercially vehicle symbol factors. Several changes to the underwriting guide. The overall proposed change is -0.7%. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Safeway Insurance Company Name of Company Denise Farnan -Consulting Actuary Perr & Knight Official - Title					
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9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Changes to commercial vehicle symbol factors. Several changes to the underwriting guide. The overall proposed change is -0.7%. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Safeway Insurance Company Name of Company Denise Farman -Consulting Actuary Perr & Knight Official - Title	•				
10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Mutil-Peril 14. Crop Hail 15. Other					
11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filling only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Changes to commercial vehicle symbol factors. Several changes to the underwriting quide. The overall proposed change is -0.7%. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Safeway Insurance Company Name of Company Denise Farnan -Consulting Actuary Perr & Knight Official - Title	· -				
12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filling only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filling. (If filling follows rates of an advisory organization, specify organization): Changes to commercial vehicle symbol factors. Several changes to the underwriting quide. The overall proposed change is -0.7%. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Safeway Insurance Company Name of Company Denise Farnan - Consulting Actuary Perr & Knight Official - Trile					
13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Changes to commercial vehicle symbol factors. Several changes to the underwriting quide. The overall proposed change is -0.7%. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Safeway Insurance Company Name of Company Denise Farnan -Consulting Actuary Perr & Knight Official - Title	12. Homeowners				
Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):Changes to commercial vehicle symbol factors. Several changes to the underwriting guide. The overall proposed change is -0.7%. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Safeway Insurance Company Name of Company Denise Farnan -Consulting Actuary Perr & Knight Official - Title					
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Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Changes to commercial vehicle symbol factors. Several changes to the underwriting guide. The overall proposed change is -0.7%. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Safeway Insurance Company Name of Company Denise Farnan -Consulting Actuary Perr & Knight Official - Title			. 10		
Denise Farnan -Consulting Actuary Perr & Knight Official - Title		hich will result f		Safeway Insurance Company	
Official – Title			•••	,	
				se Farnan -Consulting Actuary Perr & Knig	ht
				Official – Title	
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		8 - 8 to T			
• da •					

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's pre	emium or rate level produced by	y rate revision
effective 12/01/2008		

-	(1)	(2) Annual Premium	(3) Percent
A	Coverage -	Volume (Illinois) *	_ Change (+or-) **
Α	automobile Liability Private		
Р	Passenger		
C	Commercial	\$3,347,477	+2.5%
Α	utomobile Physical Damag		
Р	rivate Passenger		•
С	Commercial		
L	iability Other Than Auto		
	urglary and Theft		
	Slass		
	idelity		
	urety		
	oiler and Machinery		
	ire		
	xtended Coverage		
_	nland Marine		
• • • •	omeowners		
	ommercial Multi-Peril		
_	rop Hail	, .	
	•		
. 0	ther Life of Insurance	· · · · · · · · · · · · · · · · · · ·	
	Life of insurance		
	Does filing only apply to certa	in territory (territories) or	certain
	Classes? If so,	:	
S	pecify: Not app	licable	
_	winf denovinting of filing (14 fi	ling fallains not an of an a	als to a m.
	Brief description of filing. (If fi	ling follows rates of an a	dvisory
	Organization, specify organization):	The reter are revised	boood on a mid tarm review
	•		based on a mid-term review.
_!	The changes include new loss cost	s as snown in the 150 refere	nce listing on CAS-RR-1 to 3-IL.
*	Adjusted to reflect all prior re	to changes	
	Adjusted to reflect all prior ra *Change in Company's prem		It from application of now
	change in Company's prem ates.	ium ievei which will lesu	it irom application of new
l è	a100.	OFOURA I	ce A Mutual Company

Name of Company
Daniel P Ferris-Vice President and General Counsel
Official – Title

Change in Company's	premium or	rate level	produced by	rate
revision effective	11/01/2008		•	

revision effective $\frac{11}{01/2}$		
(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger		
Commercial 2. Automobile Physical Damage Private Passenger	4,815,902	-0.02
Commercial 3. Liability Other Than Auto 4. Burglary and Theft	1,287,523	0.00
5. Glass 6. Fidelity 7. Surety		
8. Boiler and Machinery 9. Fire		
10. Extended Coverage 11. Inland Marine 12. Homeowners		
13. Commercial Multi-Peril 14. Crop Hail		
15. Other Line of Insurance		
Does filing only apply to certain If so, specify: Auto Repair and S	territory (territories)or Service	certain classes?
Brief description of filing. (If organization, specify organization	filing follows rates of and its warm of the U	n advisory Inlimited Customers
Liability factor of 1.25 for auto due to the exposure of auto dealer	repair shops as the factors. Since auto repair sho	r was originally used ps have a reduced
exposure, we are deleting the fact	tor for auto repair shops.	
* Adjusted to reflect all prior r ** Change in Company's premium lev result from application of new	rate changes. rel which will	
	0.1. 0.1. T.	and Garage

Sentry	Select	Insurance	Company
•	Name	of Company	

Earl M. Lais - Compliance Development Sr. Analyst
Official - Title

H29219D

Change in	Company's	premium	or	rate	level	produced	by	rate
revision o	effective	10/15/20	80					

	revision effective $\frac{10/15/2}{2}$	2008	
	(1)	(2)	(3)
	(=/	Annual Premium	Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
		voidine (IIIIIIII)	charge (: or /
1.	Automobile Liability		
	Private Passenger		
	Commercial	4,815,902	6.5%
2	Automobile Physical Damage		
	Private Passenger		
	Commercial	1,287,523	8.5%
2	• • • • • • • • • • • • • • • • • • • •	1,207,323	
	Liability Other Than Auto		
	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
	Boiler and Machinery		
	Fire		
	Extended Coverage	***************************************	
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		

Doe	s filing only apply to certain	territory (territories)or	certain classes?
If	so, specify: No		
Bri	ef description of filing. (If	filing follows rates of a	n advisory
ora	anization, specify organization	n): Insurance Services Of	fice
	1.141		
Ado	ption of ISO's loss costs and i	revision to our loss cost	multipliers.
*	Adjusted to reflect all prior 1	rate changes	
	Change in Company's premium lev		
	result from application of new		,
	resure from appricacion of new	Laces.	
		·	
		Combine Colomb Ton	
		Sentry Select Insurance	
		Name of Compar	ıy

Earl M Lais - Compliance/Development Sr. Analyst
Official - Title

H29219D

	Change in Company's premium or rate	level produced by rate revision effe	ective <u>-9.20</u> 2/01/09
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability Private Passenger		
	Commercial	\$2,118,549	-8.30
2.	Automobile Physical Damage		
_,	Private Passenger		
	Commercial	\$ 1,154,750	90
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	,	
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other	The state of the s	
	Line of Insurance		
Does f	filing only apply to certain territory (terr		
Brief o	description of filing. (If filing follows r pt ISO's Loss Cost Filing - Ref CA-20	ates of an advisory organization, sp 008-BRLA1	pecify organization):
	djusted to reflect all prior rate changes.		
** C	hange in Company's premium level whi	ch will	
re	esult from application of new rates.		
	<i>i</i>		

	e presidente de la companya della companya della companya de la companya della co		Vanliner Insurance Company
	•	·	Name of Company
	and the second second		ranc of Company
	• •		
			Chris Carden, Senior Actuarial
	en e		Analyst
			Official - Title
H2921	19D		